

[From the St. Paul Pioneer Press, Feb. 21, 1999]

RAIDERS TAKE CURTIN CALL

(Tim Leighton)

Years from now, Ronda Curtin will be remembered as one of the pioneers of girls hockey in Minnesota.

Saturday night, Roseville's star left a more immediate but very lasting impression that typified her dominance of the sport the past four years.

The senior center and all-time leading scorer in state history scored four goals and assisted on one to power the top-ranked Raiders to an 8-2 victory over Bloomington Jefferson in the championship game of the state girls hockey tournament at the State Fairgrounds Coliseum.

The state championship is Roseville's second in just four years of sponsoring girls hockey. It also is the second time in four years the Raiders (27-0-1) finished a season undefeated. They were undefeated when they won the state title in 1996.

Jefferson (22-4-1) was making its second state tournament appearance and first in a championship game.

"Ronda Curtin has been an ambassador for girls hockey the past four years," Jefferson coach Dave Irvin said. "There is no question she should be the Ms. Hockey award winner. 'We're glad she's leaving; she can take her sister with her.'"

Curtin will play for the University of Minnesota next season. But her sister, Renee, will remain a potent scorer for the Raiders for two more seasons. And Ronda, who could be named the recipient of the Ms. Hockey award today, will leave with her name all over the Roseville record book.

"It was a wonderful way to end my career," Ronda Curtin said. "I'm really fortunate. I was able to come in with a bang by winning a state title in our first year, and now I'm going out with a bang. I don't know how anyone can top that. Playing girls hockey in Minnesota has provided me with lots of memories."

Curtin's four goals gave her seven for the tournament and 249 for her career. She finished her career with a state-best (boy or girl) 456 points.

Her pure hat trick in the second period blew open a close game and gave the Raiders a commanding 6-2 lead.

"Oh, those goals were fun to watch, weren't they?" Roseville coach Rich Kuehne said.

Curtin showed the flair and intelligence that became indelible to Roseville's opponents.

She started her second-period spree with a power-play goal at 6:41. She streaked down the left side, sped around a defender and stuffed a shot past Jefferson goalie Dana Hergert.

"Her reach is incredible," Irvin said. "We think she can stand at center ice and touch the sideboards. That is just one of the reasons why she is so tough to defend."

Less than two minutes later, while Roseville was trying to kill a Jefferson power play, Curtin zipped around defender Chrissie Norwich and had a breakaway.

Just when it appeared Curtin would ram into Hergert, she ripped a hard shot that hit the crossbar and bounced down into the net, giving the Raiders a 4-1 lead.

"We really came ready to play," said Renee Curtin, who assisted on two of her sister's goals. "We were very focused and didn't let up."

Well, they did momentarily because Jefferson answered 34 seconds later. Bethany Petersen trimmed Roseville's lead to 4-2 with a wicked wrist shot from just inside the blue line.

Ronda Curtin restored the Raiders' three-goal advantage with a blast from the right circle that sailed past Hergert.

"We really came ready to play," she said. Erika Mortenson gave Roseville a 6-2 lead with her second goal of the game with 27 seconds remaining in the second period.

Three goals were scored in just more than a minute midway through the first period. Roseville scored two of them, 31 seconds apart.

Lindsay O'Keefe gave the Raiders the lead after firing a wrist shot from the slot. Seconds earlier, Mortenson scored her first goal of the tournament, to go with four assists, on a tap-in from in close.

Jefferson opened the scoring on a goal by Emily Naslund at 6:34 after bottling up the Raiders in their zone. For about a minute, Roseville was unable to clear the puck out of its end.

The Raiders ultimately paid the price when Naslund, in heavy traffic in front of the goal, slid a short shot under the pads of Roseville goalie Jodi Winters.

"I was a little concerned in the early going," Kuehne said. "Jefferson came out hard, and we looked a little tentative. I started to relax and enjoy things a little more when we perked up."

Saturday's game ended Kuehne's 33-year hockey coaching career. He plans to retire to his cabin on Leech Lake. He compiled a 103-4-3 record in four years as Roseville's first girls hockey coach.

"That's the kids' record, though, not mine," he said. "They've given me many wonderful memories."

A TRIBUTE TO TOM TROXEL

HON. BOB SCHAFFER

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

Tuesday, April 13, 1999

Mr. SCHAFFER. Mr. Speaker, I rise today to pay tribute to Tom Troxel, the Director of the Intermountain Forest Industry Association. Mr. Troxel has demonstrated an unparalleled commitment to the timber industry and to the health and well-being of forests across the nation. His tireless efforts on issues related to forestry, forest health and timber practices have gone far to promote sound practices, to level the playing field with the federal government and to better our environment. Mr. Troxel's high regard for our forested lands and the people that rely on them resonates with dedication and enthusiasm. Mr. Speaker, I commend Tom Troxel for all his efforts, and I look forward to working with him in the future.

SAN LUIS OBISPO HOLOCAUST REMEMBRANCE

HON. LOIS CAPPS

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, April 13, 1999

Mrs. CAPPS. Mr. Speaker, last Sunday, April 11, a moving and important event took place in San Luis Obispo, California, which I am proud to represent.

Many of my constituents gathered at Cal Poly Theater to commemorate the 12th annual San Luis Obispo Community Holocaust Remembrance. At this yearly event, the community joins together to remember who died in

the Holocaust, pay tribute to those who survived, and seek to apply the lessons of the past to the reality of the present.

More than half a century after World War II, it is still difficult to comprehend the depth of depravity which engulfed Europe. The systematic extermination of six million Jews and millions of other innocent people—simply because of who they were—stands as the most horrific example of man's inhumanity to man. Now, as fewer and fewer survivors remain to tell their stories, it is even more incumbent upon us to recall the horrors of the Nazi era and teach them to future generations.

Two distinguished speakers were scheduled to address this year's gathering. Klara Bergman was born in Poland and spent the war running and hiding from the Nazis. She is a highly successful businesswoman and a regular on the media.

Ted Johnson, a San Luis Obispo County native, has served in the Peace Corps and the State Department and is an expert on central Europe.

The choice of these two speakers is particularly appropriate this year, as our TV screens are filled with the anguish of Kosovar refugees and our hearts are with the brave American servicemen and women who are leading the NATO attacks on Slobodan Milosovic. As we remember the Holocaust, we must all recommit ourselves to the fight against modern-day genocide and oppression. We must ensure that the phrase "Never Again" is not simply an empty slogan.

WOMEN'S HISTORY MONTH HONOREES

HON. MARTIN OLAV SABO

OF MINNESOTA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, April 13, 1999

Mr. SABO. Mr. Speaker, as Women's History Month draws to a close today, I rise to salute a woman from my Congressional District in Minnesota who, by her own example, has helped open the door for all women who choose to serve in elected public office.

Alice W. Rainville, a wife and mother of seven, was the first woman to serve on Minneapolis' Metropolitan Transit Commission. She was appointed to the post by Minnesota Governor Wendell Anderson in 1974—a rare achievement for a woman at that time in our country's history. Also in that year, Rainville served as the chair of the Democrat-Farmer-Laborer party in Minnesota's 54th Senate District. In 1975, she sought and won the Fourth Ward seat on the Minneapolis City Council. By doing so, Rainville became the fourth woman to hold a City Council seat in the history of Minneapolis. She was re-elected every two years thereafter until she retired in January, 1998.

Although she was not Minneapolis' first female City Council member, Rainville became its first female City Council President. Becoming President in 1980, she led the Council until 1990—the longest tenure of any City Council President in Minneapolis. As President, Rainville played a major role in laying the groundwork for the new Minneapolis Convention Center, which opened in 1988. She worked with local officials and consultants on the initial plans and construction of this world-

class facility, which is the largest public works project ever undertaken by the city of Minneapolis. She currently serves on the implementation team for a Convention Center expansion project and remains a valued resource for other development projects in the city.

Since Alice W. Rainville carved out her niche in Minneapolis politics in the 1970's, more and more women have entered politics and government service in Minneapolis. Today, including Mayor Sharon Sayles Belton, a majority of the Minneapolis City Council members are women. By proving to other women that they, too, can achieve success in what had once been a male-dominated political world, Alice W. Rainville is a true pioneer.

Mr. Speaker, I am pleased to honor Alice W. Rainville in celebration of Women's History Month. I thank her for her contributions to the city of Minneapolis, and I wish her continued successes in the future.

INTRODUCTION OF LEGISLATION TO SAVE MEDICARE LIVES AND MONEY

HON. FORTNEY PETE STARK

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, April 13, 1999

Mr. STARK. Mr. Speaker, today I am introducing the first in a series of bills to modernize Medicare for the future: the "Centers of Excellence Act of 1999." Not only will this legislation save Medicare money, it will save the lives of many of its beneficiaries.

Centers of Excellence has already been proven to decrease mortality and lower cost.

Centers of Excellence originated as a demonstration project in the early 1990's to evaluate the effect of volume on quality and mortality for coronary artery bypass graft (CABG) surgery. The Department of Health and Human Services selected facilities on the basis of their outstanding experience, outcomes, and efficiency in performing these procedures. They found that hospitals that do large volumes of a certain type of procedure tend to have better outcomes and quality. The demonstration resulted in an 8 percent average annual decline in mortality and saved Medicare an average of 14 percent on CABG procedures. This year, CBO has scored the Centers of Excellence proposal as saving \$300 million over five years and \$600 million over ten years.

Since the early 1990's, numerous reports have come out documenting higher quality care and lower mortality in facilities that perform a large volume of cancer treatments, cardiac surgeries, and transplants, among others. These conditions often require highly specialized care that should only be provided by the highest-rated facilities.

Centers of Excellence is currently being used in the private sector to improve quality and decrease cost.

Many private sector employers are requiring higher quality standards from their health plans. Not only are these employer groups able to improve quality through Centers of Excellence, they are also able to negotiate deeper discounts with high-volume facilities. Medicare should be given the authority to contract with certain hospitals for quality and volume—

both to save money and to deliver better health care.

Centers of Excellence has already been approved by the House in the past.

The bill we are introducing passed the House in the 1997 Budget Reconciliation bill (H.R. 1015). H.R. 1015 would have made the Centers of Excellence program a permanent part of Medicare by authorizing the Secretary to pay selected facilities a single rate for all services, potentially including post-acute services associated with a surgical procedure or hospital admission related to a medical condition. As with the CABG demonstration, selected facilities would have to meet special quality standards and would be required to implement a quality improvement plan.

The amendment was dropped in conference because of resistance from the Senate. Some Senators from States where no hospitals were designated as Centers of Excellence felt that the program tended to cast into doubt the quality or excellence of non-designated hospitals. Mr. Speaker, the name of this program is not important—what is important is that it can save money and by encouraging beneficiaries to use hospitals that have high volume, quality outcomes, it can save lives.

Like Lake Wobegon, where all the children are above average, it is human nature for all Members of Congress to want their local hospitals to be above average. But not all hospitals are above average—and this is a serious matter. In fact, it is a matter of life and death.

Indeed, good health policy in this nation would prohibit hospitals from doing sophisticated procedures if they do not have sufficient experience. This principle is applied to liver transplants, for example, and ought to be applied to other complex procedures as well. We may all have pride in our local hospitals, but the fact is: some of them are killing people because they do not do enough of certain types of procedures and therefore are not skilled in those procedures.

I regret that this important provision has been subjected to pork-barreling by previous Congresses. I hope that this body will see that it is included in the next Medicare bill that moves through Congress.

Some members of the now defunct Medicare Commission are proposing radical and unnecessary changes to Medicare. Before we cut back benefits and ask beneficiaries to pay more, we should explore every possible cost saving in the system. This bill is a step in the right direction: it saves money and improves the quality of care provided to seniors and the disabled.

The 1999 Trustees report projects that the Part A trust fund will remain viable until 2015, one of the longest periods of solvency ever projected in the history of the program. Simple changes, such as the Centers of Excellence proposal, are all that are needed to improve Medicare for its beneficiaries.

As further explanation of why this legislation makes great sense, I am including below "Extracts from the November, 1995 Research Report" on the Centers of Excellence Demonstration.

CENTERS OF EXCELLENCE DEMONSTRATION EXTRACTS FROM NOVEMBER 1995 RESEARCH REPORT

Rationale for the Demonstration: Physicians operate under different payment incentives than hospitals, so hospital managers have difficulties implementing more efficient practice

patterns. A global fee that includes physician services aligns incentives and encourages physicians to use institutional resources in a more cost effective manner.

Design of the Demonstration: Under the demonstration, Medicare paid each of the hospitals a single global rate for each discharge in DRGs 106 and 107, bypass with and without catheterization. This rate included all inpatient and physician services. The standard Medicare hospital pass-throughs were also included, i.e., capital and direct medical education, on a prorated basis. Any related readmissions were also included in the rate. Pre- and post-discharge physician services were excluded except for the standard inclusions in the surgeon's global fee. All four hospitals agreed to forego any outlier payments for particularly expensive cases. The hospitals and physicians were free to divide up the payment any way they chose.

Medicare Savings under the Demonstration: From the start of the demonstration in May 1991 through December 1993, the Medicare program saved \$15.3 million on bypass patients treated in the four original demonstration hospitals. The average discount amounted to roughly 14 percent on the \$111 million in expected spending on bypass patients, including a 90-day post-discharge period.

Ninety percent of the savings came from HCFA-negotiated discounts on the Part A and B inpatient expected payments.

Eight percent came from lower-than-expected spending on post-discharge care.

Beneficiary Savings under the Demonstration: Beneficiaries (and their insurers) saved another \$2.3 million in Part B coinsurance payments.

Total Savings under the Demonstration: Total Medicare savings estimated to have been \$17.6 million in the 2.5 year period.

TRIBUTE TO NOU KA YANG

HON. BRUCE F. VENTO

OF MINNESOTA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, April 13, 1999

Mr. VENTO. Mr. Speaker, I would like to submit for the RECORD this article from the March 21, 1999 edition of the St. Paul Pioneer Press. This article tells the extraordinary story of a St. Paul teenager who has been rewarded for her perseverance and dedication to her community.

Ms. Nou Ka Yang received the honor of being named The Boys and Girls Club Youth of the Year for the state of Minnesota. Ms. Yang has triumphed over the devastating circumstances of losing her father at the age of eight after spending time in a Laos Hmong refugee camp. She is currently a high school senior at Como Park High School where she is an honor student. She has maintained a 3.5 GPA and continues to support her community by doing activities such as translating for other Hmong residents who do not speak English.

The Boys and Girls Club Youth of the Year Award is a high honor that recently received the support of renowned talk show host Oprah Winfrey. The winners are chosen based on their leadership qualities, academic success, and ability to overcome obstacles. These are all qualities that Ms. Yang and the other candidates exhibit. Having youth in our communities with such promise allows me to feel comfortable about the future of our country.